FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

SECRETARY OF THE SENATE
PUBLIC RESTAURA

FURIVI 3	For An Authorized Committee						of SUPPONTS PAIS		
1. NAME OF COMMITTEE (in full)	TYPE O	R PRINT	Example: if typing, type over the lines.				12FE4M5		
Citizens for Harkin				· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
ADDRESS (number and stree	PO Box	811					·	···	
Check if different than previously reported. (ACC)	Des Mo	Des Moines		IA STATE		50304 ZIP CODE			
2. FEC IDENTIFICATION NU	JMBER	3. IS THE	#IS ☑ <mark>!</mark>	NEW OF	R □(A)	ENDED		STATE	DISTRICT
4. TYPE OF REPORT (Ch	oose One)			·	·,				
(a) Quarterly Reports:			(b) 12-Day F	PRE-Election	Report for	the:			
✓ April 15 Quarterly Report (Q1) ☐ July 15 Quarterly Report (Q2) ☐ October 15 Quarterly Report (Q3) ☐ January 31 Year-End Report (YE)			☐Primary			eral (12G) cial (12S)	∏Ru	inoff (12R)	
			Election on				in the State of		
			(c) 30-Day F	POST-Electio	n Report fo	or the:	•	•	
_		1		General (30	G) [Runoff (30	R)	Special (30S))
☐Termination Report (TER)			Election on				in the State of		
5. Covering Period	01/01/20	15	through	03,	/31/2015	;			
I certify that I have examine	d this Repor	t and to th	e best of my k	nowledge an	d belief it is	s true, correc	ct and comple	te.	
Type or Print Name of Treas	surer Th	eresa l	Kehoe						
Signature of Treasurer Theresa			ehoe			Date	4/12/1	15	
NOTE: Submission of false	, erroneous,	or incomp	elete information	on may subje	ct the pers	on signing t	nis Report to t	the Penalties	of 2 U.S.C. 437g.
Office Use								FE	C FORM 3

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